Mail Processing Section

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Weshington, DC

UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION Was hington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1441	812
OMB AP	PROVAL
OMB Number	3235-0076
Expires:	July 31, 2008
Estimated average	ge burden
hours per respon	se:16.00
SEC US	E ONLY
Prefix	Serial
1	<u> </u>
DATE R	ECEIVED
	1

Name of Offering (check if this is an amendment and name has changed, and inc	dicate change.)						
KeenScreen, Inc. Issuance of Shares							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE							
Type of Filing: New Filing							
A. BASIC IDENTIFICAT	ION DATA						
Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and inc	dicate change.)						
KeenScreen, Inc.	08056857						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including).						
1713 Belmont Ave., Seattle, WA 98122	(858) 442-8111						
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offices)	445						
Brief Description of Business	<u> </u>						
Online Advertising Service							
Type of Business Organization ☐ limited partnership, already formed	other (please specify)						
□ corporation □ limited partnership, already formed □ business trust □ business trust □ limited partnership, to be formed							
Month Year	AUG 0.6.2008						
Actual or Estimated Date of Incorporation or Organization: $\begin{bmatrix} 0 & 4 & 0 & 6 \\ 0 & 6 & 0 & 6 \end{bmatrix}$	Actual Estimated THOMSON DELITEDS						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab							
CN for Canada; FN for other foreign ju							
GENERAL INSTRUCTIONS							
Federal:							
Who Must File: All issuers making an offering of securities in reliance on an exemption	under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.						
77d(6).							
When To File: A notice must be filed no later than 15 days after the first sale of securit							
Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the add	dress given below or, if received at that address after the date on which it is						
due, on the date it was mailed by United States registered or certified mail to that address.							
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washi	ngton, D.C. 20549.						
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of whe photocopies of the manually signed copy or bear typed or printed signatures.	nich must be manually signed. Any copies not manually signed must be						
Information Required: A new filing must contain all information requested. Amendme	ents need only reported the name of the issuer and offering, any changes						
thereto, the information requested in Part C, and any material changes from the informatio	n previously supplied in Parts A and B. Part E and the Appendix need not						
be filed with the SEC.							
Filing Fee: There is no federal filing fee.							
State:							
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption							
that have adopted this form. Issuers relying on ULOE must file a separate notice with the made. If a state requires the payment of a fee as a precondition to the claim for the exert							
shall be filed in the appropriate states in accordance with state law. The Appendix to the no							
ATTENTION							
Failure to file notice in the appropriate states will not result in a loss of the fee	deral exemption. Conversely, failure to file the appropriate						
federal notice will not result in a loss of an available state exemption unless su							

	A. BASIC IDE	NTIFICATION DATA		
2. Enter the information requested for the following	owing:			
Each promoter of the issuer, if the issuer	ier has been organized wit	hin the past five years;		
 Each beneficial owner having the pow of the issuer; 	er to vote or dispose, or di	irect the vote or disposition	of, 10% or more	of a class of equity securities
Each executive officer and director of	corporate issuers and of c	orporate general and mana	ging partners of p	artnership issuers; and
Each general and managing partner of	partnership issuers.			
Check Box(es) that Apply: Promoter	Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) David Parkinson				
Business or Residence Address 1713 Belmont Ave., Seattle, WA 98122	(Number and Street, City	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, City	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			· ···	
Business or Residence Address	(Number and Street, City	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	B. INFORMA	TION ABOU	JT OFFER	ING						
				•			Yes	No		
1. Has the issuer sold, or does the issuer intend			X							
1	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?									
2. What is the minimum investment that will be	e accepted from any in	dividual?					s	X		
							Yes	No		
3. Does the offering permit joint ownership of										
4. Enter the information requested for each pe										
or similar remuneration for solicitation of p										
listed is an associated person or agent of a b										
of the broker or dealer. If more than five (set forth the information for that broker or d	• •	are associati	ea persons o	or such a bro	ker or deale	r, you may				
	icalci oluy.			 .		 ,				
Full Name (Last name first, if individual)										
Not Applicable										
Business or Residence Address	(Number and Street, (Jity, State, Z	ip Code)							
Name of Associated Broker or Dealer							_			
States in Which Person Listed Has Solicited or Inter	nds to Solicit Purchasers		- ·-							
(Check "All States" or check individual States)						☐ All	. States		
[AL] [AK] [AZ] [AR]	[CA] [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [IN] [IA] [KS]	[KY] [LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[NJ] [NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI] [SC] [SD] [TN]	[TX] [UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]		
Full Name (Last name first, if individual)										
Business or Residence Address	(Number and Street, 6	City, State, Z	ip Code)							
Name of Associated Broker or Dealer			-							
Name of Associated Broker of States										
States in Which Person Listed Has Solicited or Inter	nds to Solicit Purchasers									
(Check "All States" or check individual States)					******	☐ All	States		
	[CA] [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	[ID]		
	[KY] [LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [NE] [NV] [NH]	[NN] [NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI] [SC] [SD] [TN]	[TX] [UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Name (Last name first, if individual)										
Project Project Address	Olymber and Street	City State 7	in Codo)				·			
Business or Residence Address	(Number and Street,	City, State, 2	ip Code)							
Name of Associated Broker or Dealer								_		
States in Which Person Listed Has Solicited or Inter	nds to Solicit Purchasers	;					_			
(Check "All States" or check individual States	•		_	-	_			l States		
• • • • • • • • • • • • • • • • • • • •	[CA] [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
• • • • • • • • • • • • • • • • • • • •	[KY] [LA] [NJ] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[MT] [NE] [NV] [NH] [RI] [SC] [SD] [TN]	ן TX נאון (TX UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already Sold
	Type of Security	Offering Price	
	Debt	\$	s
	Equity	\$ <u>10,000</u>	\$ <u>10,000</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	\$	S
	Other (Specify)	\$	\$
	Total	\$ <u>10,000</u>	\$ <u>10,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	1	\$ <u>9,800</u>
	Non-accredited Investors	2	\$200
	Total (for filings under Rule 504 only)	3	\$ 10,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.	Toward	Paller Amount
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A	<u></u>	<u> </u>
			\$ \$
	Rule 504		s
	Total		5
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s
	Legal Fees		\$500
	Accounting Fees	<u> </u>	\$
	Engineering Fees	_	s
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify) Filing fees	_	\$
	Total		\$ <u>800</u>

	C. OFFERING PRICE						5		
	b. Enter the difference between the agg Question I and total expenses furnished in re "adjusted gross proce	sponse to Part (price given C - Question 4 to	in response to a. This differe the	once is the	ń.		\$	9,200
5.	Indicate below the amount of the adjusted gr for each of the purposes shown. If the amou and check the box to the left of the estima adjusted gross proceeds to the issuer set forth	ant for any puri te. The total of	pose is not kno of the paymen	own, furnish at ts listed must	n estimate equal the				
					- A	Payments to Officers,Directors, & Affiliates		•	ments to Others
	Salaries and fees	•••••			; 🔲	\$	$\overline{\mathbf{X}}$	S	9,200
	Purchase of real estate	•••••			🗆	\$		\$	
	Purchase, rental or leasing and installation of	machinery and	equipment		📑	\$	\overline{C}	\$	
	Construction or leasing of plant buildings and	l facilities			🗀	\$		\$	
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	assets or securi	ties of another	issuer	 	\$	[]	\$	
	Repayment of indebtedness			project (Spain)		\$ \$	(-1	\$	
	Working capital					\$ a	5 1	\$	
	Other (specify):			• •		s		s	
					- 🗇	\$	11:	S	
	Column Totals					\$	[]	\$	
	Total Payments Listed (column totals added).				: - :	<u>\ </u>	9,2	200	
					51 4 F	, 			
		D.	FEDERAL S	IGNATURE	- 	d			
cons	issuer has duly caused this notice to be signed by stitutes an undertaking by the issuer to furnish to t er to any non-accredited investor pursuant to para	the undersigned	duly authorize	d person. If this	notice is fi upon writte	led under Rule 505, the n request of its staff, th	followin e informa	g signatu tion furn	are hished by the
lssu	er (Print or Type)	Signature				Date			
Ke	enScreen, Inc.	10/	an			July 28, 2008	-		
	ne of Signer (Print or Type)	Title of Signe	r (Print or Type) ;;;	प्रदूष । जिल्लाम				
Da	vid Parkinson	President	& CEO	,	•				
	via i aranson	<u>l</u>		•	<u> </u>		-		
					<i>:</i>				
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			ATTEN:	ΓΙΟΝ	, e				
	Intentional misstatements or o	missions of		· · · · · · · · · · · · · · · · · · ·	riminal v	riolations. (See 18	U.S.C.	1001.)	
	·								

A Committee of the comm

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230,262 of such rule?		
•		See Appendix, Column 5; for state rest	2015C (FM)
2.			in which this notice is filed, a notice on Form D (17 CFR
3.	The undersigned issuer hereby undertakes	s to furnish to the state administrators, upon writ	eten request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the Exemption (ULOE) of the state in which establishing that these conditions have be	this notice is filed and understands that the issue	be satisfied to be entitled to the Uniform Limited Offering r claiming the availability of this exemption has the burden of
	e issuer has read this notification and knows horized person.	s the contents to be true and has duly caused this	notice to be signed on its behalf by the undersigned duly
Issu	uer (Print or Type)	Signature	Date
Ke	eenScreen, Inc.	The state of the s	July 28, 2008
	me of Signer (Print or Type)	Title (Print or Type)	ř.
Da	ıvid Parkinson	President & CEO	·

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2 3 4					;		
	•		T					Disqual under Sta	
	Intend	to sell	Type of security and aggregate						attach
	to non-a	ccredited	offering price		Type of	investor and		explana	tion of
}		s in State -Item 1)	offered in state (Part C-Item 1)		amount pur	rchased in State C-Item 2)		waiver (Part E	granted) Item 1)
	(Tuit D		(run o nom r)	Number of	(1,121)	Number of			
Savar	V	N-		Accredited Investors	A	Non-Accredited Investors	Amount	Yes	No
State AL	Yes	No		investors	Amount	Investors	Amount	1 65	NO
AK									
AZ								- 	
AR	***	<u> </u>	6 6 1	,	#O 000		\$200		0
CA	Х		Common Stock \$10,000	1	\$9,800	2	\$200	-	0
со									
СТ									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
IA								ļ	
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KY									
LA					<u> </u>				
ME									
MD									_
MA									
MI									
MN									
MS									

APPENDIX

1	2 3 4				5 Disqualification				
	to non-a	to sell ccredited s in State	Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State				
		-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		waiver g (Part E-	
				Number of		Number of			
		l		Accredited		Non-Accredited		,	3.7
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
МО									
MT									
NE						<u></u>			
NV		ļ							
NH									
NJ									
NM									
NY									
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WY					<u> </u>				

8 of 8